VOK 3-26-19

|   | FINANCE REPORT<br>ITTEES OF WISCO |                 |                     |   |  |  |
|---|-----------------------------------|-----------------|---------------------|---|--|--|
| Is This Report an Amendment: 🗌 Yes 📋 No   |                                   |                 | CITY OF FITCHBURG   |   |  |  |
| Instructions for completing schedules are on the back of each schedule.   |                                   |                 |                     | or i of iticubukg                             |  |  |
| COMMITTEE IDENTIFICATION  |                                   |                 | MAR <b>2</b> 5 2019 |   |  |  |
| Name of Committee Friends of Dan Bahr   |                                   |                 | OFBECESVEDLY        |   |  |  |
| 3010 Jac Mouth Fr   | OF                                | OFFICE USE ONLY |                     |   |  |  |
| FITCH burg, WI 53711  |                                   |                 |                     |   |  |  |
| Please check if address is different than previously reported, and complete the Campaign Registration Statement in the back of this form. |                                   |                 |                     |   |  |  |
| NAME OF REPORT  |                                   |                 |                     |   |  |  |
| □ January Continuing □ Pre-Primary   □ July Continuing □ September Continuing   □ September Continuing □ Pre-Election                     | Spring                            | Fall [ 5        | Special             | ☐ Termination Report also complete Schedule 4 |  |  |
| SUMMARY OF RECEIPTS AND DISBURSEMENTS   | Column A<br>This Period           | Colur<br>Caler  | ndar                |   |  |  |
| 1. RECEIPTS   |                                   | Year-To         | o-Date              |   |  |  |
| IA. Contributions (Including Loans) from Individuals  | \$ 8                              | \$ 6            | \$                  |   |  |  |
| 1B. Contributions from Committees (Transfers-In)  | \$ &                              | \$              | ×                   |   |  |  |
| 1C. Other Income and Commercial Loans   | \$ 2                              |                 |                     |   |  |  |
| TOTAL RECEIPTS (Add totals from 1A, 1B and 1C)  | \$ &                              | \$ &            | 2                   |   |  |  |
| 2. DISBURSEMENTS  |                                   |                 |                     |   |  |  |
| 2A. Gross Expenditures  | \$ 556. 70                        | \$ 556          | 70                  | )   |  |  |
| 2B. Contributions to Committees (Transfers-Out)   | \$ &                              | \$ 8            |                     | 7   |  |  |
| TOTAL DISBURSEMENTS (Add totals from 2A and 2B)   | \$ 554 70                         | \$ 550          | 705                 |   |  |  |
| CASH SUMMARY  |                                   |                 |                     |   |  |  |
| Cash Balance Beginning of Report  | \$2287,92                         |                 | ă.                  | 8   |  |  |
| Total Receipts  | \$ 0                              |                 |                     |   |  |  |
| Subtotal  | \$ 0                              | l.              |                     |   |  |  |
| Total Disbursements   | \$556,70                          | K               |                     |   |  |  |
| CASH BALANCE END OF REPORT  | \$\$1,731,22                      |                 |                     |   |  |  |
| INCURRED OBLIGATIONS (Balance at the Close of This Period-3A)   | s &                               |                 |                     |   |  |  |
| LOANS (Balance at the Close of This Period-3B)  | s &                               |                 |                     |   |  |  |
| I certify that I have examined this report and to the best of m   | v knowledge and belief it is      | s true. correct | t and comple        | ete.  |  |  |

**NOTE:** The information on this form is required by ss. 11.0204, 11.0304, 11.0404, 11.0504, 11.0604, 11.0804, 11.0904, Wis. Stats. Failure to provide the information may subject you to the penalties of ss.11.1400, 11.1401, Wis. Stats.

Type or Print Name of Candidate or Treasurer

Signature of Candidate or Treasurer

## DISBURSEMENTS Gross Expenditures

Page R of 2

Complete Committee Name
FILE AS OF DEN BEAT

|          | completing schedules are on the back of each schedule.                                   |                                 |          |  |
|----------|--|---------------------------------|----------|--|
| Date     | Full Name, Mailing Address and Zip Code<br>Of Person or Business to Whom Payment is Made | Specific Purpose of Expenditure | Amount   |  |
| 1 it and | wells frint + Digital  | Door Lit                        | \$172.70 |  |
| 12001    | Check if: 🔯 In-Kind Offset   |                                 |          |  |
| 2/8/4    | Pitchburg Star   | News Paper Ad.                  | \$384,00 |  |
| 1.7      | Check if: In-Kind Offset   |                                 |          |  |
|          |  |                                 |          |  |
|          |  | 30                              |          |  |
|          | Check if: 🗓 In-Kind Offset   |                                 |          |  |
|          | 10 15-34-10 10 10 10 10 10 10 10 10 10 10 10 10 1  | •                               |          |  |
|          |  |                                 |          |  |
|          |  |                                 |          |  |
|          | Check if: 💹 In-Kind Offset   |                                 |          |  |
|          |  |                                 |          |  |
|          |  |                                 |          |  |
|          | Check if: In-Kind Offset   | _                               |          |  |
|          |  |                                 |          |  |
|          |  | -                               |          |  |
|          |  |                                 |          |  |
|          | Check if: 📓 In-Kind Offset   |                                 |          |  |
|          |  |                                 |          |  |
| ×        |  |                                 |          |  |
|          | Check if: 🔣 In-Kind Offset   |                                 |          |  |
|          |  |                                 |          |  |
|          |  |                                 |          |  |
|          |  |                                 | ļ        |  |
|          | Check if: III In-Kind Offset   |                                 |          |  |
| 4        | SUBTOTAL ITEMIZED EXPENDITURES THIS PAGE   |                                 |          |  |
|          |  |                                 |          |  |
|          |  | TOTAL ITEMIZED EXPENDITURES     | \$       |  |
|          |  | TOTAL UNITEMIZED EXPENDITURES   |          |  |
|          | \$556,70   |                                 |          |  |
|          | TOTAL EXPENDITIONS   |                                 |          |  |